

Jim Doyle
Governor

Helene Nelson
Secretary



State of Wisconsin

Department of Health and Family Services

DIVISION OF PUBLIC HEALTH

1 WEST WILSON STREET
P O BOX 2659
MADISON WI 53701-2659

608-266-1251
FAX: 608-267-2832
dhfs.wisconsin.gov

Policy 2.3 Income Eligibility

April 2006

Guidance for Accessing Medicaid Eligibility to Determine WIC Income Eligibility

Medicaid eligibility for WIC income eligibility must be confirmed for each certification. Only one date and signature is allowed per Confidential Information Release Authorization form, referred to as the "consent form" in this document. There are two forms per sheet of paper, printed back to back.

How to access Medicaid eligibility:

- County or agency worker **NEW**
 - Notice of Decision letter
 - Automated Voice Response
 - Eligibility Hotline
 - Magnetic Strip Card Reader
 - Direct Information Access Line with Updates for Providers (DIAL-UP)
1. WIC staff must obtain the parent's consent for the Medicaid recipient who does not bring in a Notice of Decision Letter. **NEW** Because of adjunctive eligibility, at a minimum, obtain the consent of the pregnant or postpartum woman or the infant. The woman and infant grant adjunctive eligibility for other family members, therefore, eligibility does not need to be verified for each family member. Children do not grant adjunctive eligibility to other family members. Therefore, if the WIC family consists of only children, a consent form must be completed for each child and each child's Medicaid eligibility must be verified. Verifying Medicaid eligibility rather than seeing proof of income is a service to the WIC applicant. It is up to the applicant to provide the proof of income.
 2. The Department of Health and Family Services Confidential Information Release Authorization form [HFS-9II (**rev. 5/03**) and HFS-9IIS (**rev. 5/03**)] must be completed for the Medicaid recipient who needs Medicaid eligibility information requested from the Medicaid Program. Order copies from the State WIC Office, using the DMT-25 form. A Memorandum of Understanding has been established between the Division of Health Care Financing and the Division of Public Health so that WIC staff can access Medicaid eligibility information of WIC applicants and participants to determine WIC income eligibility. The Department of Health and Family Services revised the consent forms in 5/03 to make them compliant with the Health Insurance Portability and Accountability Act (HIPAA).

3. The Medicaid Program sends one Notice of Decision letter per family and lists all the family members who are eligible for Medicaid along with the date of eligibility. Since we need to use the most current income to determine WIC income eligibility and the Medicaid eligibility period is for one year, consider how current the letter is when determining income eligibility. The Notice of Decision Letter cannot be used as proof of identify for the WIC Program.
4. **NEW** The consent form must be signed when accessing Medicaid eligibility information for a WIC applicant or participant from a county or agency worker. Contact the WIC Program Operations Coordinator to discuss unique arrangements or when WIC coordinates with the agency for combined clinics.
5. The WIC Projects must use the WIC Provider Number provided by the Medicaid Program to verify Medicaid eligibility information even if the WIC project is part of an agency that has a Medicaid provider number. The agency's number is probably for HealthCheck or Prenatal Care Coordination, not for WIC. The WIC Provider Number is: 39799900. This number will allow WIC staff to access the eligibility verification system (EVS) to verify a recipient's Medicaid eligibility information for those who do not bring their Notice of Decision letter to WIC. These include the Automated Voice Response System and Eligibility Hotline. Contact the WIC Program Operations Coordinator with questions.
6. The Automated Voice Response System (AVR) is free. It is open 24 hours a day, 7 days a week. Access eligibility by using a touch tone phone by calling 1-800-947-3544 or 608-221-4247 and entering the Medicaid ID number. If the blue plastic Forward card is not available, the recipient's social security number and date of birth may be entered to learn of Medicaid eligibility status. Eligibility status information is current as of the date of the call. If a call is made around the 20th of the month, the eligibility information would pertain to the rest of the current month and the following month.
7. The Eligibility Hotline is free. Dial 1-800-947-9827 or 608-221-9254. Hours are Monday, Wednesday – Friday from 8:30 a.m. to 4:30 p.m. and on Tuesdays from 9:30 a.m. to 4:30 p.m. Staff are available to speak with you about the eligibility of Medicaid recipients. If the Medicaid recipient does not bring in the Forward card, WIC staff may request eligibility information by providing the name of the person and date of birth.
8. The Magnetic Strip Card Readers may be purchased by agencies to swipe the Forward cards. **NEW** For more information, search the Medicaid website at www.dhfs.wisconsin.gov/medicaid
9. The Direct Information Access Line with Updates for Providers (DIAL-UP) is available for those agencies that wish to purchase the computer software. **NEW** For more information, search the Medicaid website at www.dhfs.wisconsin.gov/medicaid
10. If the Medicaid information needed to determine WIC income eligibility is not brought to clinic or if the clinic is held in a place without a phone, use other sources of income documentation to determine income eligibility. **NEW** Or use one of the options listed in Policy 2.3 under H. Applicants lacking necessary income documentation at certification appointment.
11. The Forward cards are designed to be kept indefinitely by recipients, even when they may have periods of ineligibility. Medicaid eligibility for WIC income eligibility must be confirmed for

each certification. **NEW** Women or infants grant adjunctive eligibility for other family members but children do not.

12. You are encouraged to instruct applicants and current WIC participants to keep their most current Notice of Decision letter in their WIC folder and bring it to their certification appointment(s). Include the message in the appointment reminders.
13. As usual, participants should be told to report changes in family size and income to the WIC project, including Medicaid eligibility.
14. Only one date and signature is allowed per Confidential Information Release Authorization form. The consent may be used for a period of 2 years for infants and children unless a termination from the WIC Program occurs. A new consent form must be completed at the next certification after a termination or after the 2-year period. When a woman is terminated from the WIC Program, a new consent form must be completed at the next certification.
15. If the WIC participant acquires a different guardian or caregiver during the 2 year period, a new consent form must be signed by the new guardian or caregiver. Examples include when a child is transferred from one biological parent to another biological parent (such as in cases of separation or divorce), to a foster parent, guardian, or a caregiver.
16. The Confidential Information Release Authorization form has been printed back to back. One sheet provides two forms, which will provide consent for up to 4 years. **NEW** Because women and infants (not children) grant adjunctive eligibility for other family members, only one consent form is needed for the family. File the consent form in the appropriate file, either the pregnant woman's file or the infant's file or the family file.
17. If the woman participant or parent chooses to not sign the consent form, other proof of income will be needed to determine WIC income eligibility. This statement was moved to "Understandings" as an "Exception."
18. **NEW** The Automated Voice Response System, Eligibility Hotline, or print out from the Medicaid Magnetic Strip Care reader (or software) may no longer be used as proof of identity. Proof of identity needs to be presented at the appointment. Use of Medicaid adjunctive eligibility is only required of WIC for proof of income.
19. The Confidential Information Release Authorization forms for the WIC Program in English and Spanish can be accessed from the Department of Health and Family Services (DHFS) forms library. **NEW** You may search for the DHFS forms at www.dhfs.wisconsin.gov/forms The HFS-9II and HFS-9IIS forms can be accessed either from the alphabetical (A-D) or numeric (HFS) form listings.

How to Fill Out the Confidential Information Release Authorization Form

The Department of Health and Family Services Confidential Information Release Authorization form (HFS-9II and HFS-9IIS) must be used when accessing Medicaid eligibility information for a WIC applicant or participant from a county or agency worker, Eligibility Hotline, Automated Voice Response System, Magnetic Strip Card Reader or DIAL-UP System. WIC Project staff may not

create their own form for this consent or add this consent to another form. This form must then be filed in the WIC applicant's file or family file and retained as long as the file is retained.

Individual Who is Subject of Record: At the top of the consent form, write in the name of the WIC applicant in the box at the top right hand corner. You do not need to include address or date of birth unless you do not have that in the WIC files. You do not need to include an identifying number. Record subject has been defined as the WIC applicant.

Information May be Released to: fill in the agency name and address.

Signature –Individual Who is Subject of Record

At the bottom of the consent form, ask the woman WIC applicant to sign her name and date in the space of "Signature –Individual Who is Subject of Record."

Signature –Other Person Legally Authorized to Consent to Disclosure

The parent, guardian or caregiver of the infant or child WIC applicant should sign in the space of "Signature –Other Person Legally Authorized to Consent to Disclosure," include the relationship, such as, mother, father, foster mother, aunt, grandmother, etc. and write in the date. Follow the definitions in Policy 1.4 (rev. 2003). A proxy must not sign this consent form.

This guidance replaces the October 13, 1999, March 5, 2003, and June 5, 2003 documents.